

## Washoe County Community Service Application

## CITIZEN ADVISORY BOARD

Volunteer... Make a Difference in Washoe County!

Please complete the entire application. Your application will be kept on file for 12 months. You will need to reapply after that time if you still wish to be considered for a position.

Which Citizen Advisory Board (CAB) are you applying for?		
Wi	Idlife Advisory Committee	
To see which CAB geographical area you reside in, go to the ma	p at our website:	
https://www.washoecounty.us/mgrsoff/board_committees/cabs/CABfiles/CABHomepage/CAB_bounda		
ries All Aug2016,pdf	,	
Your Name: Lori Canepa Bomberger		
Residential Home Address		
Address:		
City: State: $\cap V$	Zip: 89523	
Assessor's Parcel Number if known:	Zip: 873 45	
	ne: (775) 846-7434	
E-mail.	10. (12) 676-1131	
Mailing Address (if different from reside	ntial home address)	
Address: (Same)		
City: State:	Zip:	
Occupation and Business A	ddress	
Job Title: President	Mul C33	
Business Name: Divine Blinds		
Address (Street and/or P.O. Box): $11407$ Mpgul Road Zip: $89523$		
Assessor's Parcel Number if known: 032-181-04		
Business Phone: (-175)329-7434		
E-mail: divineblindsnulgmail.com		
J		
Are you registered to vote in Washoe County?	∑ Yes ☐ No	
The Washoe County Commission requires that a person	be a registered voter in Washoe	
County (if eligible to vote) to be considered for member	ship on a Citizen Advisory Board.	
This requirement may be waived on a case-by-case basis	s by the County Commission.	
How long have you lived in your area? (Years/Months) 나 &		
How long have you lived in Washoe County? (Years/Months) L		
Have you ever been convicted of a felony or misdemeanor other	r than minor traffic violations?	
If yes, please list conviction dates and nature:		

Please print or type, and complete the form entirely.

October 2017

## **Washoe County Community Service Application**

Briefly, in your own words explain why you would like to be appointed to the Board.	
well, working in this capacity and	
learning more about the wildlite	•
in this area, is very interesting	
to me. I sunt rancher tarmer	h
participation is key to understand	ivig
now we co-exist with the occur	rence
animals, as it is a lady	) <u>.</u>
for me, being on a 17 acre rand	~^ ,

Describe your qualifications for this appointment, including, but not limited to, your educational background, professional background and awards/honors.

Lief educustrial background is that I have a bachelor's degree from U.N.R. in Human Development a family studies. I currently own huy own business, of 13 years. I have owned a 17 acre ranch for 6 years, that has been in our family for over 100 years. I am a mative nevadan and participated in ranching my whole life.

List your community and/or civic involvement history.

- Crisis Line volunteer

- university of Nevada Reno-Adopt A vinevolunteer

## **Washoe County Community Service Application**

Appointed to:

Please list the name and phone number of any personal references that we may contact.		
Please attach any additional information you wish.		
I understand the role and responsibilities of membership on this board or commission and am willing to serve. If appointed, I will attend required meetings and training and will adhere to pertinent bylaws. I understand that some appointments require a Financial Disclosure Form to be submitted to the Nevada State Ethics Commission. I certify that, to the best of my knowledge, the information I have provided in this application is true and correct. If the information provided is false or incomplete, it shall be sufficient cause for disqualification or removal. If appointed to a Citizen Advisory Board (CAB), I agree to attend a CAB new member orientation session and open meeting law training within six months of my appointment. I understand that failure to comply with this requirement will result in automatic removal from the Citizen Advisory Board.  Signature:  Date:  Date:		
PLEASE RETURN THE APPLICATION TO:		
Washoe County Manager's Office P.O. Box 11130, 1001 E. Ninth Street, Room A201, Reno, NV 89520-0027 FAX: (775) 328-2491		
Alice McQuone - Phone: (775) 328-2722; Email: amcquone@washoecounty.us		
Date Received: Commission District: 1 2 3 4 5		
Appointed to: Jurisdiction: RN/SP/WC		

Once submitted, your document will be part of the public record and available for public review.

Date of Appointment: \_\_\_\_\_



In order to comply with Washoe County's Nepotism Policy, we need to ask if you are related to anyone currently employed by Washoe County.

X	No, I am not related to anyone emplo	oyed by Washoe County.
	Yes, I am related to someone employ that you are related by blood or man	ed by Washoe County. Please list the names of all persons riage (e.g. spouse, child, sibling, etc.).
 Name		Relationship
Depart	ment (if known)	•
Name		Relationship
Depart	ment (if known)	· · · · · · · · · · · · · · · · · · ·

Y. Canepa Bomberga

L. Conepa Brubego